UNITED STATES DISTRICT COURT

for the

Eastern	District of New York	
CHRISTAL TAYLOR,)))	
Plaintiff(s) v. GIFTED NURSES, LLC and THE SCHULMAN ANI SCHACHNE INSTITUTE FOR NURSING AND REHABILITATION, INC.,		22-cv-7265
Defendant(s))	

SUMMONS IN A CIVIL ACTION

To: (Defendant's name and address) GIFTED NURSES, LLC, 3330 West Esplanade Avenue S, Suite 505, Metairie, Louisiana 70002

THE SCHULMAN AND SCHACHNE INSTITUTE FOR NURSING AND REHABILITATION, INC., 555 Rockaway Parkway, Brooklyn, New York 11212

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

David D. Barnhorn, Esq. Law Office of Peter A. Romero PLLC 490 Wheeler Road, Suite 250 Hauppauge, New York 11788

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

11/30/2022 Bren

Brenna B. Mahoney

CLERK OF COURT

/s/Shirley Ramos

Signature of Clerk or Deputy Clerk

Date: 11/30/2022

AO 440 (Rev. 06/12) Summons in a Civil Action (Page 2)

Civil Action No.

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (1))

	This summons for (nan	ne of individual and title, if any)				
was re	ceived by me on (date)	· · ·				
	☐ I personally served	the summons on the individual	at (place)			
			on (date)			
	☐ I left the summons at the individual's residence or usual place of abode with (name)					
	, a person of suitable age and discretion who resides there,					
	on (date), and mailed a copy to the individual's last known address; or					
	☐ I served the summons on (name of individual) , who is designated by law to accept service of process on behalf of (name of organization)					
			on (date)	; or		
	☐ I returned the sumn	nons unexecuted because		; or		
	☐ Other (specify):					
	My fees are \$	for travel and \$	for services, for a total of \$	0.00		
	I declare under penalty of perjury that this information is true.					
Date:						
			Server's signature			
			Printed name and title			
			Server's address			

Additional information regarding attempted service, etc: